**Queensland Rose Society Inc**

**ROSE SHOW ENTRY FORM**

* Please list all exhibits you are entering
* Email list to annebaster@gmail.com by 9pm Thursday before the show
* Phone or Message Anne 0439 720 565

NAME ………………………………………………………………..……

EXHIBITOR NUMBER ……………………………………………………

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| CLASS NUMBER | NUMBER OF EXHIBITS |  | CLASS NUMBER | NUMBER OF EXHIBITS |  | CLASS NUMBER | NUMBER OF EXHIBITS |
| 1 |  |  | 31 |  |  | 61 |  |
| 2 |  |  | 32 |  |  | 62 |  |
| 3 |  |  | 33 |  |  | 63 |  |
| 4 |  |  | 34 |  |  | 64 |  |
| 5 |  |  | 35 |  |  | 65 |  |
| 6 |  |  | 36 |  |  | 66 |  |
| 7 |  |  | 37 |  |  | 67 |  |
| 8 |  |  | 38 |  |  | 68 |  |
| 9 |  |  | 39 |  |  | 69 |  |
| 10 |  |  | 40 |  |  | 70 |  |
| 11 |  |  | 41 |  |  | 71 |  |
| 12 |  |  | 42 |  |  | 72 |  |
| 13 |  |  | 43 |  |  | 73 |  |
| 14 |  |  | 44 |  |  | 74 |  |
| 15 |  |  | 45 |  |  | 75 |  |
| 16 |  |  | 46 |  |  | 76 |  |
| 17 |  |  | 47 |  |  | 77 |  |
| 18 |  |  | 48 |  |  | 78 |  |
| 19 |  |  | 49 |  |  | 79 |  |
| 20 |  |  | 50 |  |  | 80 |  |
| 21 |  |  | 51 |  |  | 81 |  |
| 22 |  |  | 52 |  |  | 82 |  |
| 23 |  |  | 53 |  |  | 83 |  |
| 24 |  |  | 54 |  |  | 84 |  |
| 25 |  |  | 55 |  |  | 85 |  |
| 26 |  |  | 56 |  |  | 86 |  |
| 27 |  |  | 57 |  |  | 87 |  |
| 28 |  |  | 58 |  |  | 88 |  |
| 29 |  |  | 59 |  |  | 89 |  |
| 30 |  |  | 60 |  |  |  |  |
| **total** |  |  | **total** |  |  | **total** |  |